

# *DESTINATION PURE*

Dear Mentee:

Welcome to Destination Pure & Kingsmen Inc.! We are excited that you will be joining us for our Second Annual Atlanta Conference.

I will be one of your Mentors. As your mentor, my role will be to use my experience and knowledge to give you advice, support, and answer any questions you may have about life. I want you to feel comfortable to share as much and as little as possible. Because of this policy, I ask that everything we discuss as a group, remain within that group. On your first day, you will be asked to acknowledge an honor code form, which will outline your duty of confidence.

I look forward to seeing you!

If you have any questions between now and then, please feel free to call me at (917)- 244-1793.

Sincerely,

Barbara Senat-Thelusma



# DESTINATION PURE & KINGSMEN INC.

## Mentee Application

Please write clearly and answer every question.

Date: \_\_\_\_\_ Did you have a mentor before through our program? Yes or No

If yes, would you like the same mentor this time? Yes or No

Did you apply before and not receive a mentor? Yes or No

Name: \_\_\_\_\_

Circle: Boy or Girl      Age: \_\_\_\_\_      Birthday: \_\_\_\_\_      Ethnicity: \_\_\_\_\_

Grade: \_\_\_\_\_      School: \_\_\_\_\_

Name of Parent(s)/Guardian(s): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_      Zip Code: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

Child's Mobile/Pager Phone Number(s): \_\_\_\_\_

Parent's Mobile/Pager Phone Number(s): \_\_\_\_\_

Child's Email Address: \_\_\_\_\_

Parent's Email Address: \_\_\_\_\_

Do you prefer to receive news from the Youth Mentor Program regarding upcoming events and other important information via email, in the mail, or both?

How did you hear about the Youth Mentor Program?



Why do you want a mentor? (For Advice, friendship, "big brother/big sister," to learn about college life, or as someone to just hang out with?)

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What kind of person would you like your mentor to be? (A good listener, active in sports, etc.)

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What are three words that would best describe you? \_\_\_\_\_

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Please describe three things that you are good at: \_\_\_\_\_

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Is there anything that you would change about yourself?

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What clubs, activities, or sports are you in now? How much of your time do these activities take up? \_\_\_\_

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What kind of activities would you like to do during this Program?

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Is there anything else that you would like to describe about yourself that may help us create a tailored mentoring program? \_\_\_\_\_

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Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Time Schedule

Please use a pen or marker and color in the spaces that you are busy. Leave the spaces open when you are free. This way we can match you with a mentor with the same schedule. Have a parent or guardian help you with this part.

*Example: I have school until 3:00 pm every day. I also have basketball practice Tuesday and Thursday from 4:00-5:00 pm. I have piano lessons on Saturday at 10:00-11:00 am.*

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
10AM		\\	\\	\\	\\	\\	\\
11AM		\\	\\	\\	\\	\\	
Noon		\\	\\	\\	\\	\\	
1PM		\\	\\	\\	\\	\\	
2PM		\\	\\	\\	\\	\\	
3PM		\\	\\	\\	\\	\\	
4PM			\\		\\		
5PM							
6PM							

Now fill out your schedule:

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
10AM							
11AM							
Noon							
1PM							
2PM							
3PM							
4PM							
5PM							
6PM							

**DESTINATION PURE & KINGSMEN INC.**



## PARENT/GUARDIAN CONSENT AND LIABILITY RELEASE FORM

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I, \_\_\_\_\_, give my consent for my child to participate in the Destination Pure Youth program. I will also give consent for my child to participate in all Youth Mentor Program activities; including all organized activities and transportation. In consideration of the advantages of participation in the Youth Mentor Program, the undersigned agrees that the mentors of Destination Pure & Kingsmen Inc., its agents, and its employees shall be released and exempt from any liability for damages for bodily injuries or property damages that may occur as a result of participation in the Youth Mentor Program, except to the extent of insurance liability as provided by law.

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Signature

Date

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Print Name

Relationship to child

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Address

City

Zip

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Home Phone Number

Mobile/Pager Phone Number

Work Phone Number

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Email Address

Language Spoken by Parent/Guardian

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Emergency Contact and Phone(s)

Will you be able to help with transportation of your child?

Yes or No

On a scale of 1 to 5 (1 being the least and 5 being the most) how involved will you be in this program?  
UNINVOLVED 1                      2                      3                      4                      5 VERY INVOLVED

Please write here why you think your child would benefit from the program and list anything of interest, i.e. special needs or concerns: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**\*\*\*\*\*PLEASE RETURN WITH MENTEE APPLICATION\*\*\*\*\***

## **Important Information for Becoming a Mentee**

### **What is the purpose of the program?**

The Youth Mentor Program is designed to give your child an opportunity to have a one-on-one relationship with a DP mentors as recreational and group activities, mentors provide friendship, support, and guidance to your child. The mentors are there to act as a positive role model and confidant.

### **What about transportation?**

It is the responsibility of each parent or sponsor to bring their child to our bi-weekly meetings. There is also a parent carpool list that parents can be placed on if they are interested in coordinating carpools to events with other parents whose children are in the program. Please contact us if you would like to be added and receive a copy of this roster.

### **Who are the mentors and why do they want to be a part of the program?**

Mentors are men and women in the community from a variety of different backgrounds. They have been interviewed, trained, had their references checked, and invited to share their experiences, coach and give advice to your children. These mentors have a variety of motivations for getting involved with the program. However, all mentors want to be a positive role model in a child's life.

### **What kinds of activities will they do together?**

Meetings will be at a day and time convenient for everyone. All activities are scheduled. Activities range from table talks, going to the mall, to visiting nursing homes, homeless shelters, to seeing movies, or going on hikes together. All activities are agreed upon by you, your child, and the mentors.

The only events that are pre-arranged are monthly events that we hold at the agreed location in which special guest speakers have been invited. These events typically take place on Friday evenings or Saturday afternoons. You will be informed of these events prior to meetings.

### **What should I do if my child cannot attend a meeting or event with their mentor?**

Have your child let us know in advance and if possible we may try to meet at a time convenient for everyone that week.

### **What if the mentor says things with which I do not agree?**

We will always inform you on the topics of discussion ahead of time. If you feel that your child will not benefit from a session please let us know ahead of time that they will not attend.

### **Who will pay for activities?**

This year, each participant is required to bring \$15.00 per meeting, which covers cost of speaker and food. Families with two children or more is required to bring \$10.00 per meeting.

**\*\*\*\*\*PLEASE BRING WITH YOU TO OUR FIRST MEETING\*\*\*\*\***

## ***DESTINATION PURE***

### **Life Plan #1**

**Directions:** *Make a goal for each area of your life in each box. Make the goals realistic and achievable in the timeframe indicated. Think about what support or resources you might need and how you will know you have reached your goals. Be sure that your goals are SMART (Specific, Measurable, Achievable, Realistic, and Time-Based).*



LIFE AREA	NEXT MONTH	3 MONTHS	6 MONTHS
<b>My Education</b> College, self-directed learning, certifications, Business Start-up, etc.			
<b>My Job and Career</b> skill development, resume prep, job shadowing, career explorations, etc.			
<b>My Family and Friends</b> family relationships, goals for or with friends, support network, mentors, etc.			
<b>My Health</b> physical health, emotional health, exercise and nutrition, rest and relaxation, etc.			
<b>My Finances</b> savings, debt, credit, money management, budgeting, asset development, etc.			
<b>My Leadership</b> skills to develop, opportunities I want, community service, civic engagement, upcoming elections, etc.			
<b>Other</b> spiritual practice, Other personal goals, etc.			

